

DEC 18 2008

STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

SOS REC. OF STATE

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER Edgemont Herald Tribune		2. DATE 10-20-2008
3. FREQUENCY OF ISSUE weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY 51	3B. ANNUAL SUBSCRIPTION PRICE \$ 30/\$38
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) 410 Second Ave., (PO Box 660), Edgemont, SD 57735-0660		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) 410 Second Ave, (PO Box 660), Edgemont, SD 57735-0660		
6. FULL NAME OF PUBLISHER: Anne I. Cassens		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.) FULL NAME COMPLETE MAILING ADDRESS Cassens Companies Inc PO Box 660, Edgemont, SD 57735-0660		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.) NONE		
9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	850	850
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors and counter sales.	205	205
2. Mail Subscription (Paid and or requested)	440	452
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	645	657
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	0	0
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	10	10
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	655	667
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	95	95
2. Return from News Agents	100	90
G. TOTAL (Sum of E, F1 and F2 - Should equal net press run shown in A)	850	850

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public
I swear that the statements made by me are true, correct, and complete:

Anne I. Cassens (Signature) President (Title)
State of South Dakota)
County of Fall River)
(Seal))
My commission expires: 10/20/2013



Anne I. Cassens, 11594 Tall Grass Rd., Edgemont, SD 57735

Sheena Cassens Douglas, ~~442~~ 425 Fairlane Dr., Rapid City, SD 57701